



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
LANSING

ELIZABETH HERTEL  
DIRECTOR

## **New Hire & Rehire Forms**

### **Manual hires not through Onboarding**

#### Required Forms

1. [Form I-9](#)
  - Email supporting documents and page 1 of I-9 form to: [MDHHS-HR-Orientation@Michigan.gov](mailto:MDHHS-HR-Orientation@Michigan.gov) on or before your third day of employment
2. [Federal W-4](#)
3. [Michigan W4](#)
4. [Personal Information & Emergency Contact](#)
5. [Direct Deposit](#)
6. [Life Insurance and Accidental Duty Death Beneficiary](#)
7. [Final Compensation Beneficiary Designation](#)
8. [Oath of Office](#)
9. [Motor Vehicle Driver Agreement](#)
10. Drug and Alcohol Testing Information
  - [Drug and Alcohol Testing Program Acknowledgement](#) - *Required for all employees*
  - [Acknowledgement of Required Training for Supervisors](#) – *Required for Supervisors only*
11. [Disclosure of Interest & Ethical Standards and Conduct](#)
12. [City Tax Withholding](#) – *if applicable*
13. [Assistance Program](#)
14. [Supplemental Employment](#) – *if applicable*
15. [Military Credit](#)
16. [Policy Awareness and Training Requirements](#)
17. [Office of Recipient Rights Acknowledgement](#) – *Center for Forensic Psychiatry only*